



Supportive care after breast cancer

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The September 2024 issue of *Annals of Palliative Medicine* features 5 Original Articles, 7 Review Articles, 1 Editorial Commentary, and 1 Letter to the Editor. All 7 of the Review Articles focus on breast cancer and comprise the first installment of a Special Series entitled, “Supportive Care After Breast Cancer: Challenges and Opportunities”, co-edited by international collaborators Drs. Muna Alkhaifi (Canada), Charles B. Simone II (United States of America), Maryam Lustberg (United States of America), Isabelle Choi (United States of America), Henry Wong (China), and Elwyn Zhang (Canada). This Message From the Editor-in-Chief focuses on the breast cancer Special Series and those 7 articles in the September 2024 issue that were published just prior and dedicated to the 2024 Breast Cancer Awareness Month (October).

Breast cancer is the most common non-cutaneous malignancy among women worldwide (1). With improving outcomes for breast cancer afforded by advancements in detection, treatment modalities, and supportive care have fortunately come a proliferation of breast cancer survivors (2). These survivors, most of whom have undergone surgery and many of whom have also undergone radiation therapy and/or systemic therapy, face complex and varied complications from their cancer and their cancer treatment. In order to best help these survivors and address their challenges, an improved understanding of current practice patterns and the breadth of survivorship for breast cancer is necessary. Such an understanding can help to inform the development of models of care and best practices for clinical workflows to improve survivorship care delivery.

This special series—spanning symptom management, advocacy, policy, collaboration between healthcare providers, and patient communication—provides readers with a comprehensive and up-to-date understanding of the pertinent issues, challenges, opportunities, and latest

developments in breast cancer survivorship care and research.

Among the articles of this special series published in the September issue of *Annals of Palliative Medicine*, the first is a Review Article authored by Christiane Bergerot and colleagues on psychological issues faced by survivors of breast cancer (3). This article details the multifaceted emotional complexities faced by breast cancer survivors, including fear of recurrence and body image insecurities. Risk factors contributing to psychological distress, common unmet needs of survivors, and psychological interventions and strategies to enhance quality of life are reported. This article helps serve as an advocacy statement for the importance of integrating comprehensive psychological support into survivorship care, and it highlights consideration in providing holistic care to breast cancer survivors.

Next, Peera and colleagues report on fears and realities of alopecia in breast cancer survivors (4). Along with nausea and emesis, alopecia is one of the three most undesirable side effects from chemotherapy. Alopecia can impact body image, health status, psychosocial well-being, and sense of self (5,6). This narrative review summarizes research on the impact that alopecia has on breast cancer survivors and provides a comprehensive overview of preventative options, as well as treatments and coping strategies.

Vuong and Warner then report on the unique challenges and opportunities in survivorship for younger patients with breast cancer (7). Younger women with breast cancer experience unique survivorship challenges, include childbearing concerns, premature menopause, body image issues, excessive fear of cancer recurrence, difficulties with intimate relationships, and financial toxicities (8). They also often require more aggressive cancer treatments. This article details the challenges encountered by younger women

and demonstrates how specialized supportive care programs tailored for younger patients can address these challenges.

Narusawa and colleagues next report on the preventions and management of post-mastectomy pain syndrome beyond medical treatment. In their comprehensive narrative review, they define chronic pain as pain persisting for more than 3 months after breast cancer surgery, and they report on studies investigating surgical anesthetics, postoperative medications, and surgical procedures for post-mastectomy pain syndrome prevention (9). Beyond pharmacotherapies and physical interventions, the authors detail an article on mindfulness (10) and an article on yoga (11) as useful psychosocial interventions.

Next, Yang and Von Ah report on the impact on quality of life and updates to treatment for cancer-related cognitive impairment, which is self-reported cognitive complaints and/or impaired performance in multiple cognitive domains (12). Their narrative review provides an overview of the problem and the impact of cancer-related cognitive impairment, including the impact on everyday functioning, work ability, engagement and productivity, and overall quality of life. It also reports on pharmacological and non-pharmacological management approaches and the most current research aimed at addressing this morbidity in cancer survivors.

Kennedy and colleagues report on sexual health after breast cancer (13). Breast cancer survivors are more likely to experience sexual dysfunction, including dyspareunia, impaired sexual well-being, and dissatisfaction with sexual function, among other challenges (14). The clinical practice review by Kennedy *et al.* discusses the current literature and outlines knowledge gaps related to sexual health in patients with breast cancer. It details sexual health challenges and concerns of survivors, their contributing factors, treatments and interventions such as medical management, counseling and educational interventions, and practice recommendations.

Finally, Raeisi Dehkordi and colleagues report on stigma experiences of male breast cancer patients and their impact as barriers to care (15). With only approximately 1% of breast cancers diagnosed in men (16), these patients have unique diagnostic and treatment challenges relative to women with breast cancer. They also face stigma due to lack of awareness in the medical community, and they are more likely to experience feelings of embarrassment over their diagnosis (17). In addition to the resulting delays in diagnosis and the patient anxiety and depression from these

stigmas, they also serve as a barrier to care. The authors call for an increased awareness among the medical community to improve the diagnosis and treatment of male breast cancer, and for measures to address gaps of male-specific information and treatment guidelines.

With additional articles to be published—including articles on the needs of survivors for their physicians, prevention and management of chronic radiation-induced dermatitis, living with neuropathy, arm lymphedema, survivorship in elderly breast cancer survivors, and integrative medicine in survivorship care—the Special Series “Supportive Care After Breast Cancer: Challenges and Opportunities” provides the latest and most comprehensive information available for breast cancer survivors and the providers caring for them.

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